CANDIDATE'S REPORT (to be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate WILLIAM BILL SCHWERTZ	Office Sought (Include title of office as well as parish, city, town and/or election district.)	OFFICE USE ONLY
$a = 10$ $S^{\prime\prime}$	KENNER CITY	4/06
2109 27 LA. 70062 KENNER, LA. 70062	A = UNCIZMAN	A
KENNER, TO	DISTRICT 2	page
	*.	Jup 1/14
3. Date of MARCH 27, 2	010	
This report covers from 2-5-10	through 12-31-10	
4. Type of Report:		
180th day prior to primary	40th day after general	
90th day prior to primary	Annual (future election)	
30th day prior to primary	Supplemental (past election)	
10th day prior to primary		
10th day prior to general	Amendment to prior report	
5. FINAL REPORT If:		•
WithdrawnFiled after the election AND all loans and debts paid		
Unopposed		-
6. Name and Address of Financial Institution (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.)	7. Full Name and Address of Treasurer WILLIAM H. SCHWERTZ. 2109 27 TH ST. XENNER, LA. 70062	
SELF	KENNER, LA. 70062	
G Name of Person Pressring Pennst / 11// C	Am SCHWERTZ	
9. Name of Person Preparing Report WILCIAM SCHWERTZ Daytime Telephone 504-289-1988		
10. WE HEREBY CERTIFY that the information cor is true and correct to the best of our knowledge, in have been made nor contributions received that information required to be reported by the Louisian deliberately omitted.	stained in this report and the attached schedules formation and belief, and that no expenditures t have not been reported herein, and that no	FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY Name and address of principal cariptaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary)
This 14 day of JANUARY	2014	# 6.0
	,	8
Welliam N. Schwett	504-289-1988	
Signature of Candidate/Chairperson (To be signed by Chairperson <i>only</i> if report by principal campaign committee)	Daytime Telephone	
	•	
	•	
Signature of Treasurer	Daytime Telephone	: :
Form 102, Rev. 1/98, Page Rev. 3/00		

SCHEDULE B: LOANS RECEIVED				
The following information must be provided for each lost Also, complete this schedule for loans received in prior peven if from the same source. Any personal funds a car	eriods that are still outstar	nding. Separate loans mu	st be reported separately.	
1. Name and address of lender M.//LIAM IT- SCHWERTZ	2 a. Date* /2 - 3/	b. Interest rate	%(a.p.r.)	
2.10 971" 51.	d. Balance due		\$ 1588.70	
KENNER, LA. 70062	*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$			
3. Endorsers/Guarantors	4. Repayments this perior		Internet .	
SELF	Date	Principal	interest	
÷				
(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)			ite amounts are not known,	
1. Name and address of lender	2. a. Date*	b. Interest rate	%(a.p.r.)	
WILLIAM H. SCHWERTZ 2109 27" ST		c. Amount borrowed*		
KENNER, LA. 70062		d. Balance due\$		
· · · · · · · · · · · · · · · · · · ·	*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$			
3. Endorsers/Guarantors	Repayments this period Date	d Principal	Interest	
SELF		:		
1	·			
	· -	:		
		:		
		:		
(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.) (List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)				